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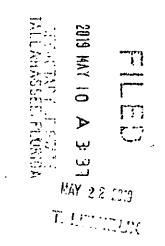
(Rec	questor's Name)	
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COVER LETTER

TO: Amendment Section

Division of Corporations

NAME OF CORPORATION: FORTUNE DEVELOPMENT CORP.
NAME OF CORPORATION: FORTUNE DEVE Opment Corp. DOCUMENT NUMBER: POI 0000 42226
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Name of Contact Person
- tontine
Firm/ Company
1300 Brickell Ave
1300 Brickell Ave Address Mami PC 33131
City/ State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
0/p a1(305) 351-1000
Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
□ \$35 Filing Fee □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

of

	FILED
(Name of Corporat	ion as currently filed with the Florida Dept. of State)
	2019 HAY 10 A 3:37
(Docur	ment Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florid its Articles of Incorporation:	a Statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the co	orporation:
	The new
name must be distinguishable and contain the wor "Corp.," "Inc.," or Co.," or the designation "Corp word "chartered," "professional association," or the	rd "corporation," "company," or "incorporated" or the abbreviation o," "Inc," or "Co". A professional corporation name must contain the abbreviation "P,A."
B. Enter new principal office address, if applicable	
(Principal office address <u>MUST BE A STREET ADI</u>	<u>ORESS</u>)
	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u></u>
D. If amending the registered agent and/or register	red office address in Florida, enter the name of the
new registered agent and/or the new registered	office address:
Name of New Registered Agent	
·	/FI 1
	(Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
N. D. C. L. L. G.	
New Registered Agent's Signature, if changing Reg	istered Agent: I am familiar with and accept the obligations of the position.
- 1-, 2-sept me appointment us registered agent.	t was familian with and accept the obligations of the position.
Sign	ature of New Registered Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: \underline{X} Change	<u>PT</u>	John Do	<u>e</u>		
X Remove	<u>V</u>	Mike Jor	nes		
X Add	<u>sv</u>	Sally Sm	nith		
Type of Action (Check One)	<u>Title</u>		<u>Name</u>		<u>Addres</u> s
1) Change	PD	_	Edpardo	Defortina	130 ° Brickell Ave Mirmi Fl 33131
Add			V		MAMI F(33131
Remove					
2) Change		_			
Add					
Remove					
3) Change		_			
Add					
Remove					
4) Change		_			
Add					
Remove					
5) Change					
Add					
Remove					
6) Change	-	_			
Add					
Damoua					

If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	(Attach additional sheets, if necessary).	(Be specific)
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(if not applicable, indicate N/A)		
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	provisions for implementing the amen	nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
	provisions for implementing the amen	nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:

and the second s	
The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, document's effective date on the Department of State's records.	this date will not be listed as th
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amend by the shareholders was/were sufficient for approval.	lment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following s must be separately provided for each voting group entitled to vote separately on the amendment(s)	statement s):
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shar action was not required. The amendment(s) was/were adopted by the incorporators without shareholder action and sharehol action was not required. Dated (By a director, president or other officer – if directors or officers have not selected, by an incorporator – if in the hands of a receiver, trustee, or other appointed fiduciary by that fiduciary) (Typed or printed name of person signing)	been er court
(Typed or printed name of person signing)	
(Title of person signing)	el
(Title of person signing)	